STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT ---Revised 10-01-78 DISTRIBUTION Format 06-01-83 CONSERVATION DIVISION Page 1 BANTA PE P. O. BOX 2088 OIL CONSERVITA ET NEW MEXICO 87501 PILE V.S.G.a. SANTA FE TRANSPORTER REQUEST FOR ALLOWABLE OPERATOR AND PROBATION OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Southland Royalty Company PO Box 4289, Farmington, NM Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Dry Gas Oil Recompletion Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner, DESCRIPTION OF WELL AND LEASE Pool Name, including Formation Well No. Kind of Lease Legge Name Lease No. Blanco Mesa Verde State, Federal of Fee) Chamberlain Location 1650 East North San Juan 32N 12W Township Range NMPM Line of Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS or Condensate Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil PO Box 4289, Farmington, NM Meridian Oil Inc. Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas unterra Gas Gathering Co. P. O. Box 1899, Bloomfield, NM 87413 Rge. is gas actually connected? Two. If well produces oil or liquids, 12W ! H 14 32N give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: NOTE: Complete Parts IV and V on reverse side if necessary. OIL CONSERVATION DIVISION VI. CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Drilling Clerk

May 15, 1987

(Tule)

PERMINATION ON CONTRACTOR

SUPERVISION DISTRICT # 3 This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or despense well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.

County

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, ell name or number, or transporter or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.